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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

114 (1087-87) Attorney Docket No. Leonard Bell et al. First Inventor METHOD OF TREATING HEMOLYTIC DISEASE Title EL985194128US Express Mail Label No.

Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🔽 Specification Total Pages Computer Readable Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications Statement Regarding Fed sponsored R & D CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix Paper - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) Statements verifying identity of above copies - Detailed Description ACCOMPANYING APPLICATION PARTS - Claim(s)
- Abstract of the Disclosure Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets ____ 37 CFR 3.73(b) Statement 10. Power of (when there is an assignee) Attorney 5. Oath or Declaration Total Sheets 11. English Translation Document (if applicable) a. Newly executed (original or copy) Copies of IDS Information Disclosure Statement (IDS)/PTO-1449 Citations Copy from a prior application (37 CFR 1.63(d)) Preliminary Amendment 13 (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. 🗸 (Should be specifically itemized) **DELETION OF INVENTOR(S)** 15. l Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 16. L Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. Other: Check - filing fee. - \$4,434,00...... 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation ☐ Continuation-in-part (CIP) of prior application No.: Examiner_ Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS OR Correspondence address below **Customer Number:** Name Mark Farber Alexion Pharmaceuticals, Inc. Address 352 Knotter Drive Zip Code City Cheshire Connecticut 06410 Fax Telephone (203) 272-2596 Country USA (203) 271-8195 Registration No. (Attorney/Agent) Name (Print/Type) 32,978 Peter DeLuca Signature February 3, 2004

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL985194128US Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 3, 2004



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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

✓ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$) 2,217.0	0
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Complete if Known					
Application Number					
Filing Date	February 3, 2004				
First Named Inventor	Leonard Bell et al.				
Examiner Name					
Art Unit					
Attorney Docket No.	114 (1087-87)				

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES						
Deposit Account:		Large Entity Small Entity					
Deposit 50 0440	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
Account Number 50-2140	1051	130	2051		Surcharge - late filing fee or oath		
Deposit Account Carter, DeLuca, Farrell & Schmidt, LLP	1052	50	2052	25	Surcharge - late provisional filing fee or		
Name	1053	130	1053	130	cover sheet Non-English specification		
The Director is authorized to: (check all that apply)		2,520			For filing a request for ex parte reexamination		
Charge fee(s) indicated below Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s)		920*	1804	920*	Requesting publication of SIR prior to		
Charge any additional fee(s) or any underpayment of fee(s) Charge fee(s) indicated below, except for the filing fee		4 0 4 0 *	4005	4 040*	Examiner action		
to the above-identified deposit account.	1805	1,840*	1805	1,840"	Requesting publication of SIR after Examiner action		
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month		
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee 385.00	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	<u> </u>	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 385.00	1452	110	2452	55	Petition to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2453	665	Petition to revive - unintentional		
Fee from	1501	1,330	2501		Utility issue fee (or reissue)		
Extra Claims below Fee Paid Total Claims 171 -20** = 151 x 9.00 = 1,359.00	11	480	2502		Design issue fee		
Independent 14 31 - 11 × 43.00 -473.00	1503	640	2503		Plant issue fee		
Claims 14 - 3 - 11 \ 43.00 4473.00	1460	130	1460		Petitions to the Commissioner		
Large Entity Small Entity	1807	50	1807		Processing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description	1806	180	1806		Submission of Information Disclosure Stmt Recording each patent assignment per		
Code (\$)	8021	40	802	1 40	property (times number of properties)		
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))		
1204 86 2204 43 ** Reissue independent claims over original patent		770	2801	385	Request for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1801 1802	900	1802	900			
[10]			Other fee (specify)				
SUBTOTAL (2) (\$) 1,832.00 **or number previously paid, if greater; For Reissues, see above	*Red	uced by	Basic	Filing F	ee Paid SUBTOTAL (3) (\$) 0.00		

(Complete (if applicable)) SUBMITTED BY Registration No. Name (Print/Type) Peter DeLuga 32,978 Telephone (631) 501-5700 Date February 3, 2004 Signature

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL985194128US addressed to: Mail Stop Patent Application, envelope as "Express Mail Post Office to Addressee" Mail Label Number

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 3,2004